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Client Ref

Bollman

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200885

INFORMATION DISCLOSURE STATEMENT BY APPLICANT

Applicant: TIPNIS

Appln. No.: 10/023,704

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Date: August 12, 2009

Page

1

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Examiner: SMITH, Sheila

Group Art Unit 2617

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| Examiner's Initials* | | Document Number | Date MM/YYYY | Name (Family Name of First Inventor) | Class | SubClass | Filing Date (if appropriate) |
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| | | | | | | | | Enclosed | No | Enclosed | No |
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Examiner

Date Considered:

*EXAMINER: Initial if citation considered, whether or not citation is in conformance with MPEP § 609. Draw line through citation if not in conformance and not considered. Include copy of this form with next communication to Applicant.